

MONTANA COMMERCIAL CREDIT, INC.

1106 Central Avenue, Great Falls, MT 59401

Phone (406) 268-9840 ❖ Fax (406) 268-0028

LESSEE/APPLICANT							
Legal Business Name			FEIN#		Time in Business		<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
Business Address			Contact		Business Phone		
City	State	Zip	County		Business Fax		
Email address				Truck Fleet	Trailer Fleet	MC Number	
PRINCIPALS (Owner, Shareholders or Partners) Use additional sheet if necessary							
Name		Suffix	Title		% Ownership	DOB	Social Security #
Home Address		City		State	Zip	Home Phone	Cell Phone
Name		Suffix	Title		% Ownership	DOB	Social Security #
Home Address		City		State	Zip	Home Phone	Cell Phone
BANKS (If less than 2 years, provide prior bank)							
Name/Branch	City/State	Customer Since	Deposit Acct #	Avg. Balance	Phone	Contact	
EQUIPMENT FINANCING							
Name/Branch	City/State	Customer Since	Loan Acct #	Avg. Balance	Phone	Contact	
TRADES (30 day accounts)							
Name/Branch	City/State	Customer Since	Account #	High Credit	Phone	Contact	
Equipment to Purchase and Cost:							

The Information provided above is true and complete. Montana Commercial Credit, Inc. and/or its assigns is authorized to check my credit and employment history. I authorize all past and present creditors, and credit reporting agencies, to release any and all necessary credit information to Montana Commercial Credit, Inc. and/or its assigns. This shall be a continuing authorization for all present and future disclosures of account information on the Applicant. In addition, I authorize the photocopying of my driver's license for verification purposes.

Signature

Date

Signature

Date